

# Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

<b>Establishment Name</b> HAMPTON INN	<b>Telephone Number</b> Est 812-945-2771 Own 812-945-2771	<b>Date of Inspection</b> 12/21/2020	<b>ID#</b>
<b>Address</b> 411 WEST SPRING STREET, NEW ALBANY IN 47150			
<b>Owner</b> NEW ALBANY HOSPITALITY	<b>Purpose</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	<b>Follow Up</b>	<b>Released</b> 12/31/2020
<b>Owner's Address</b> 411 W. SPRING ST. NEW ALBANY, IN 47150-		<b>Menu Type</b> 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
<b>Person in Charge</b> SHANNON MURPHY			
<b>Responsible Person's Email</b> SHANNON.MURPHY@GHS-HOTELS.COM			
<b>Certified Food Handler</b>			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
430	X			Observed ceiling tile and drywall to be stained around ceiling fire suppression nozzle.	1 WEEK

Summary of Violations      C      1        NC      0        R      0  

Received by (name and title printed):

SHANNON MURPHY

Inspected by (name and title printed):

A.J. Ingram CHIEF FOOD SPECIALIST

Received by (signature):

Inspected by (signature):



cc:

cc:

cc: